**NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE**

# Minutes of the Board Strategy Meeting

Thursday 25 February 2021 via Zoom

These notes are a summary record of the main points discussed at the meeting and the decisions made. They are not intended to provide a verbatim record of the Board’s discussion.

## Board members present

Sharmila Nebhrajani Chairman

Dame Elaine Inglesby-Burke Non-Executive Director

Professor Tim Irish Non-Executive Director (for items 1-11)

Dr Rima Makarem Non-Executive Director (for items 1-7 and 9)

Tom Wright Non-Executive Director

Professor Gillian Leng Chief Executive

Meindert Boysen Centre for Health Technology Evaluation Director

Dr Paul Chrisp Centre for Guidelines Director

Jennifer Howells Finance, Strategy and Transformation Director

Alexia Tonnel Digital, Information and Technology Director

## Directors in attendance

Jane Gizbert Communications Director

Dr Felix Greaves Science, Evidence and Analytics Director

Judith Richardson Acting Health and Social Care Director

## In attendance

Dr Hugh McIntyre Medical Adviser to the Board

David Coombs Associate Director, Corporate Office (minutes)

Rebecca Threlfall Chief of Staff

Annie Coppel Associate Director, Field Team (for item 6)

Chris Flood Content strategy lead (for part of item 8)

Johanna Hulme Associate Director Medicines Advice (for part of item 8)

Lisa Appleyard Associate Director, Corporate Communications (for item 9)

Eric Power Programme Director, Centre for Guidelines (for item 11)

## Also present

Lynne Copp NHS SCW CSU (for item 7)

Catherine Thomas NHS SCW CSU (for item 7)

## Apologies for absence (item 1)

1. None.

## Declarations of interest (item 2)

1. Tim Irish stated that he is taking up a role in a joint venture company involving Kings Health Partners that is being incorporated this week and would send David Coombs the details so the register of interests could be updated accordingly.

Action: Tim Irish and David Coombs

1. It was confirmed there were no conflicts of interest relevant to the meeting.

## Minutes of December 2020 Board strategy meeting (item 3)

1. The minutes of the Board strategy meeting held on 16 December 2020 were agreed as a correct record.

## Action log (item 4)

1. The Board noted the update on the actions from previous Board strategy meetings. Judith Richardson confirmed that while the aim is to complete the comprehensive review of the implementation strategy by Q4, 2021/22, the approach to implementation would begin to change before this. In response to a query about the next steps for engaging the Board with the health technology evaluation methods and process reviews, Gill Leng stated that she would discuss this further with Meindert Boysen and Carole Longson and confirm the arrangements with the Chairman.

Action: Gill Leng and Meindert Boysen

1. The Board confirmed the actions marked ‘completed’ could be closed.

## Chairman’s remarks (item 5)

1. Sharmila Nebhrajani provided an oral update on the recruitment of the new non-executive directors (NEDs) and noted that an announcement is expected imminently. The discussions around the handling of some candidates’ interests have indicated that it would be beneficial to look at alternative methods for securing access to expertise from individuals with connections to the life sciences industry whose interests may preclude them from a formal governance role at NICE. This may include establishing an informal advisory council, which she is currently discussing with Gill Leng.
2. The Board noted the update and welcomed the upcoming appointments.

## External context (item 6)

1. Annie Coppel briefed the Board on the field team’s current feedback from the health and social care front-line and highlighted the ongoing challenges facing the system from the COVID-19 pandemic. The field team have continued to engage with external stakeholders but have adapted to the changed circumstances and remain sensitive to the environment. Current areas of engagement include increasing work with the Academic Health Science Networks (AHSNs) and seeking to influence the content of NHS England & NHS Improvement (NHSE&I) guidance to support primary care network contract service specifications. Annie summarised the recent feedback from the system on NICE’s guidance and what more NICE could do, including to ensure guidance helps address system priorities and is produced in a timely manner without compromising quality or rigour.
2. The Board discussed the feedback and how NICE could maximise its effectiveness in supporting the recovery from the pandemic, especially with regard to non-COVID morbidity and mortality. The discussion highlighted the importance of working closely with the NHSE&I regional offices to understand the system’s priorities for recovery, to ensure that the field team’s support and NICE’s wider work is aligned to these. The Board discussed how to ensure NICE’s guidance, which was largely produced before the pandemic, will support the changed environment. It was noted that the vision for the guidelines programme of rationalising the programme into topic suites, and focusing on the topics of most importance to the system’s needs, will be key to enhancing NICE’s contribution to the recovery.

## Organisational design review (item 7)

1. Lynne Copp and Catherine Thomas joined the meeting to present their recommendations from the organisational design review. The presentation outlined 5 design options, along with the advantages and disadvantages of each, and other important issues to consider including the pace of change and risk appetite.
2. Board members reflected on the presentation and commented on the merits of the different options. There was agreement on the necessity for cultural change in order to successfully deliver the new strategy, some of which likely be rooted in changes to the organisational structure. On this latter point, there was broad support for a form of web/network structure with potentially some matrix working, with mixed views on the merits, extent and configuration of the matrix element.
3. Board members discussed the pace for change and agreed there should be sufficient urgency and ambition. Although it was noted that the extent of the staff engagement, cultural change and leadership development that will be required to ensure successful delivery, will influence the timescale. Any changes need also to be carefully and thoroughly planned. There was encouragement to focus on the changes that could have most impact in achieving culture change and avoid destabilising the organisation.
4. Gill Leng noted the intention to appoint an interim programme director to lead the change and offered to bring further information to the April Board Strategy meeting on the next steps. Sharmila Nebhrajani welcomed this proposal and highlighted the need to consider how to utilise the NEDs in developing the proposals.

Action: Gill Leng

## Business planning (item 9)

1. Jennifer Howells introduced the item and asked for the Board’s feedback on section 6 of the strategy, which relates to the enabling strategies, and the first draft of the 2021/22 annual business plan. Jennifer thanked Tracey Barr and David Coombs for their work on the business plan, and the group of senior staff who were delegated responsibility for drafting section 6 of the strategy and successfully adopted a multi-disciplinary rather than directorate-based approach.
2. The Board reviewed the drafts and highlighted areas to be addressed in the next iteration of the business plan, including greater reference to the integration of health and social care, and consideration of how NICE will engage directly with the users of health and care services as part of a ‘pull’ strategy for promoting NICE guidance, including through social media. Board members highlighted the need to review the language in parts of the business plan to ensure the planned actions and intentions are clear. It was noted that some of the business plan objectives that are central to the strategy are indicated as contingent on resources, and the Executive Team were asked to consider whether other activities could be reprioritised to ensure objectives central to the strategy are resourced. Similarly, it was noted that a number of the objectives were due in Q4 and the Executive Team were asked to consider whether any of timescales could be brought forward, by delaying other activities if necessary.
3. Gill Leng stated that she would review the timescales and resourcing for the objectives with the directors to address the above comments. The resourcing will also be discussed further in upcoming budget setting meetings.

Action: Gill Leng and Jennifer Howells

## Chief Executive’s update (item 8)

1. Gill Leng opened her update by highlighting the current pressures felt by staff due to the ongoing effects of the pandemic, including the school closures, and overall level of work. Gill highlighted the range of topics and issues covered in the update that had been circulated prior to the meeting, including the health and care white paper, the impact of the current lockdown on the technology appraisal (TA) programme, and recent statistics from the Office for Life Sciences (OLS) that highlighted the ongoing reduction in the time between market authorisation and publication of NICE’s final TA guidance. Gill updated the Board on latest developments with current and potential judicial reviews involving NICE since the update had been circulated to the Board, noting that the claimants in the case involving the appraisal of Sapropterin have sought permission to appeal to the Supreme Court, and discussions continue with a view to resolving the challenge to the Cannabis-based medicinal products guideline. Gill also highlighted that in response to a request from NHSE&I NICE produced an evidence summary on the use of tocilizumab for treating COVID-19.
2. The Board discussed the information from the OLS report and noted the importance of the Board being aware when TA guidance is not produced within the target timeframe and optimised recommendations are potentially contentious. Gill Leng confirmed these issues would be fed into the work to develop a new performance reporting framework, with proposed new metrics brought to the April Board strategy meeting for review.

Action: Jennifer Howells

1. Chris Flood and Johanna Hulme joined the meeting to provide an update on the integrated guidance project that aims to develop alternative ways of presenting and structuring NICE’s content to support clinicians and wider public in making evidence-based decisions and supporting shared decision making. The current pilot, focused on type 2 diabetes, is utilising a ‘test and learn’ approach to more quickly deliver improvements. The Board strongly supported this approach and the work undertaken to date. Further progress updates were requested at a suitable point, including the lessons from the agile ‘test and learn’ approach.

Action: Paul Chrisp

1. The linkage between the integrated guidance project and the content authoring tool were noted, and the Board highlighted the importance of ensuring that content can be accessed on a range of platforms and not simply a web browser. It was noted this also relates to the Board’s recent comments about adopting a marketing ‘pull’ strategy to potentially promote guidance directly to service users and the wider public (B2B2C). Gill Leng noted that the Executive Team will explore this concept in relation to NICE’s work and will bring this back to the Board for further discussion.
2. Gill Leng updated the Board on the finalisation of the strategic plan and the feedback from the pre-launch engagement events. Stakeholders were supportive of the proposals at these sessions but highlighted the importance of ensuring NICE’s role with digital technologies is both clear and sustainable in the long-term. Gill outlined how the strategic plan has been updated in response to the Board’s feedback in January, and noted that the latest copy will be shared with the NEDs. It was agreed to also circulate further information on the arrangements for the launch event on 19 April.

Action: Jane Gizbert

1. Gill noted the discussion at the January Board meeting on the importance of linking the new organisational values and behaviours to the strategy. The Executive Team have considered this further and it is proposed to group these by ‘our work’ and ‘our organisation’ – values NICE wants to be recognised for externally, in line with the strategy, and values that are more internally-focussed. The Board supported this approach.
2. Jennifer Howells updated the Board on the budget setting for 2021/22. As previously discussed with the Board, the intention is to enter the year with an over-committed budget given historic under-spends, but ensure close monitoring and an ability to reduce expenditure if necessary. Discussions with the Department for Health and Social Care (DHSC) on the grant-in-aid allocation continue. There has been some positive progress, but it is unlikely that the final budget will be confirmed in time for the business plan to come back to the March Board meeting. Jennifer outlined the outstanding uncertainties and risks around the financial position, along with the mitigations.

## Procedures for the review of commercial and managed access requests: interim statement (item 10)

1. The item was withdrawn to enable further work.

## End of EU transition period and UK:EU Trade and Cooperation Agreement (item 11)

1. Eric Power presented the report on the impact of the UK:EU Trade and Cooperation Agreement and the end of the EU transition period on NICE. He noted the need to move from an emergency planning response to consider how teams will manage risks and engage with opportunities arising from EU exit on an ongoing basis as part of routine business.
2. The Board welcomed the update and highlighted the need to remain alert to any unforeseen challenges or risks that may arise from the detail of the agreement.

## Benefits and concerns (item 12)

1. The Board briefly reviewed the meeting. The length of the agenda was noted as a challenge but it was agreed that all of the items were appropriate for the Board discussion. Board members noted and welcomed the current work to procure software for distributing the board papers, with the aim of having this ready for the June Board meeting. There was support for commencing face to face Board meetings as soon as possible, with a target of April, as it was felt this would aid the Board’s effectiveness in the context of the challenging issues facing NICE and onboarding the new NEDs.
2. David Coombs was asked to provide an update on the procurement of the Board software.

Action: David Coombs

## Any other business (item 13)

1. None.

## Date of the next meeting

1. The next Board strategy meeting will be Wednesday 21 April 2021, 10.30am.